



City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811
 Tel 407-581-8161 * Fax 407-581-0313 * www.universalengineering.com

PERMIT CARD – PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. **WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD.** PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

Scope of Work: ROOF: 2040 SF asphalt shingles for New Single Family Residence

Comments: None

Project Information

Address: 7902 Daetwyler Drive, Belle Isle, FL 32812
 Parcel ID: 29-27-30-1882-00-011
 Property Owner: Higgins, Richard
 Phone Number: 407 468 1423

 Company Name: Hastings Homes Inc
 Contractor Name: Hastings, Keith
 License Number: CRC057105
 Address: 3603 Bancroft Blvd, Orlando, FL 32833
 Phone Number: 407 468 8294

Permit Number: 2016-02-013

Date of Application: 03/03/2016

Date Permit Issued: 03/04/2016

WARNING TO OWNER: "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT." ON THE JOB INSPECTION(S) MUST BE MADE BEFORE PROCEEDING WITH SUBSEQUENT WORK. THIS CARD MUST BE DISPLAYED OUTSIDE AND BE PROTECTED FROM THE WEATHER WHILE BEING VISIBLE FROM THE STREET UNTIL THE FINAL INSPECTIONS HAVE BEEN APPROVED.

BUILDING FEATURES

IMPACT FEES

School
 Traffic

ZONING FEES

Zoning Fee

UNIVERSAL ENG - BUILDING FEES

Demo	\$
Building	\$
Fence	\$
Driveway	\$
Shed	\$
Window(s)	\$
Door(s)	\$
PrePower	\$
Electrical	\$
Temp Pole	\$
Plumbing	\$
Mechanical	\$
Gas	\$
Roofing	\$82.50
Boat Dock	\$
Screen Encl	\$
Swimming Pool	\$

SURCHARGE FEES

Surcharge Fee \$2.00
 Surcharge Fee \$2.00

TOTAL FEES \$86.50

Date Paid 4-12-16

BUILDING INSPECTOR USE ONLY

IF APPLICABLE:

Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions

Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO

BUILDING

- 1st _____ (Footing/Foundation)
 Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? ____
- 2nd _____ (Slab)
- 3rd _____ (Lintel)(Wall Reinforcing on Masonry Building)
- 4th _____ (Exterior Framing)(Roof/Wall Sheathing)
- 5th _____ (Framing) (To be made after Plumbing/ Mechanical/
 Electrical Rough-Ins & Windows/Doors Installed)
- 6th _____ (Insulation to be Made After Roof Installed)
- 7th _____ (Drywall)
- 8th _____ (Sidewalk/Driveway)
- 9th _____ (Other)
- 10th _____ (Final – After MEP and Other Applicable Finals)

ROOFING

- 1ST ROOFING Deck Nailing/Dry-in/Flashing _____
- 2nd ROOFING Covering In-Progress _____
- 3rd ROOFING Covering Final _____

PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc.)



City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811 * Fax 407-581-0313 * www.universalengineering.com

RECEIVED
MAR 03 2016

APPLICATION FOR ROOFING PERMIT

YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

DATE OF APPLICATION: 12-15-15 ROOF PERMIT NUMBER 2016-02-013
PLEASE PRINT. The undersigned hereby applies for a permit to make installations as indicated below:

Project Address 7902 Dactwyle Rd, Belle Isle, FL 32809 X 32812
Property Owner Richard Higgins Phone 407 468 1427
Property Owner's Mailing Address _____ City Orlando
State FL Zip Code 32809 Parcel Id Number: 29-23-30-1882-00-011
REQUIRED! To obtain this information, please visit <http://www.ocpaf1.org/Searches/ParcelSearch.aspx>

Class of Building: Old New Type of Building: Residential Commercial Other
Type of Work: New Roof ReRoof

- REQUIRED! Florida Product Approval Screen Printout from www.floridabuilding.org showing the Code Version
- REQUIRED! Florida Product Approval Installation Instructions from www.floridabuilding.org (not the manufacturer instructions)
- REQUIRED! Copies of your General Liability & Worker's Comp Insurance Certificate & State and Local Licenses

Please indicate the nature of work by completing the information below:
Roof Square Footage: 34' x 60' 2040sf Number of Stories: 2 Job Valuation: \$ 4800 ⁰⁰/₁₀₀
Type: Asphalt Shingles Metal Modified Bitumen Other: _____

Industry Standard G120

I hereby certify that the above is true and correct to the best of my knowledge and make Application for Permit as outlined above, and if same is granted I agree to conform to all Florida Building Code Regulations and City Ordinances regulating same and in accordance with plans submitted. The issuance of this permit does not grant permission to violate any applicable Town and/or State of Florida codes and/or ordinances. By signing below, I recognize Republic Services is by legal contract the sole authorized provider of garbage, recycling, yard waste, and commercial garbage and construction debris collection and disposal services with the city limits of the City. Contractors, homeowners and commercial businesses may contact Republic Services at 407-293-8000 to setup accounts for Commercial, Construction Roll Off, or other services needed. Rates are fixed by contract and are available at City Hall or from Republic Services. The City enforces the contract through its code enforcement office. Failure to comply will result in a stop work order.

LICENSE HOLDER SIGNATURE [Signature] LICENSE # CRC 057105
LICENSE HOLDER NAME Keith Hastings COMPANY NAME Hastings Homes Inc.
Street Address 3613 Bancroft Blvd
City ORL State FL Zip Code 32833 Phone Number 407-468-8294
Email Address hastingshinc@gmail.com

Building Official: [Signature] Date 3-7-16
Verified Contractor's Licenses & Insurance are on file [Signature] Date 3-8-16

Zoning Fee \$ 0 new
Permit Fee \$ 55.-
Review Fee \$ 27.50
3% Florida Surcharge \$ 4.00
Total Permit Fee \$ 86.50

NOTE: The Building Permit Number is required if the Roof Installation is associated with any construction or alteration where a Building Permit has been issued.



City of Belle Isle
 Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811
 Tel 407-581-8161 * Fax 407-581-0313 * www.universaleengineering.com



Product Approval Form BY: _____

DATE: 2-15-16 7902 Daetwyler PERMIT # 2016-02-013
 PROJECT ADDRESS parcel ID 29-23-30-1882-00-011 Belle Isle, FL 32809 X 32812

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72m, please provide the information and approval numbers of the building components listed below if they will be utilized on the building or structure. FL Approved products are listed online at www.floridabuilding.org or can be obtained from the local product supplier. The following information must be turned in with permit application and available onsite for inspections:

1. This Product Approval Cover Sheet
2. Internet screen from FloridaBuilding.org showing PA#, approval and code edition stamped
3. Manufacturer's installation details from FloridaBuilding.org and requirements for each product stamped

Product Type	Manufacturer	Model/Series	FL Product Approval #	Product Type	Manufacturer	Model/Series	FL Product Approval #
EXTERIOR DOORS				WALL PANELS			
Swinging				Sliding			
Sliding				Soffits			
Sectional/Rollup				Storefront			
Other				Glass Block			
				Other			
WINDOWS				ROOFING PRODUCTS			
Single/Dbl Hung				Asphalt Shingles			7006
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				Underlayment *	Atlas		16226-P2
Skylights				Other			
Other							
STRUCTURAL COMPONENTS				OTHER			
Wood Connectors				Ventl Viny/soffit	KAYCAN		12198.1
Wood Anchors							
Truss Plates							
Insulation Forms							
Lintels							
Other							

It is the applicant's responsibility to verify that specific products have been installed in accordance with their limitations and with the minimum required design pressures for the structure. Specific compliance will be verified during field inspections.

Applicant Signature _____


Date 2-15-16



FLORIDA DEPARTMENT OF
Business & Professional Regulation



[BCIS Home](#) | [Log In](#) | [User Registration](#) | [Hot Topics](#) | [Submit Surcharge](#) | [Stats & Facts](#) | [Publications](#) | [FBC Staff](#) | [BCIS Site Map](#) | [Links](#) | [Search](#)



Product Approval
USER: Public User

License efficiently. Regulate fairly.

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > [Application Detail](#)

OFFICE OF THE SECRETARY

FL # FL7006-R9
Application Type Revision
Code Version 2014
Application Status Approved
 *Approved by DBPR. Approvals by DBPR shall be reviewed and ratified by the POC and/or the Commission if necessary.

Comments
 Archived

Product Manufacturer IKO Industries, Ltd
Address/Phone/Email 40 Hansen Road South
 Brampton, NON-US L6W 3H4
 (708) 496-2800 Ext 200
 rmetz001@tampabay.rr.com

Authorized Signature Robert Metz
 rmetz001@tampabay.rr.com

Technical Representative Bob Metz
Address/Phone/Email REMCO of Pinellas
 456 Avila Circle NE
 Saint Petersburg, FL 33703
 (727) 776-5261
 rmetz001@tampabay.rr.com

Quality Assurance Representative Don Shaw
Address/Phone/Email IKO Industries LTD
 120 Hay Rd.
 Wilmington, DE 19808
 (717) 579-6706
 don.shaw@iko.com

Category Roofing
Subcategory Asphalt Shingles

Compliance Method Certification Mark or Listing

Certification Agency FM Approvals - CER
Validated By Locke Bowden
 ✓ Validation Checklist - Hardcopy Received

Referenced Standard and Year (of Standard)

Standard	Year
ASTM D3161 modified to 110 mph	2009
ASTM D3462	2009
ASTM D7158 Class H	2008
ASTM E108	2007



Equivalence of Product Standards

Certified By

Product Approval Method

Method 1 Option A

Date Submitted

06/28/2015

Date Validated

06/30/2015

Date Pending FBC Approval

Date Approved

07/06/2015

Summary of Products		
FL #	Model, Number or Name	Description
7006.1	Cambridge, Cambridge HD and CRC Biltmore AR	Laminated architectural fiberglass asphalt shingle manufactured at IKO's Kankakee, IL; Hawkesbury, Ont.; Wilmington, DE; Sylacauga,AL and Toronto, Ont. plants
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other:		Certification Agency Certificate FL7006_R9_C_CAC_FM Letter - ASTM d3161 letter - 4-15-2015 .pdf FL7006_R9_C_CAC_FM Letter - ASTM d3462 letter - 5.6.15.pdf FL7006_R9_C_CAC_FM Letter - ASTM E 108 letter - 5.3.15 .pdf Quality Assurance Contract Expiration Date 12/31/2020 Installation Instructions FL7006_R9_II_IKO-133-02-01 Letter - Installation Instructions for FBC FL7006.pdf Verified By: Duc T Nguyen 65034 Created by Independent Third Party: No Evaluation Reports Created by Independent Third Party:
7006.2	Hip and Ridge 12 Cap fiberglass shingles	This is a 12" x 12" fiberglass asphalt shingle used to cover the hip and/or ridge of an asphalt shingle roof system manufactured in Toronto, Ont. and Brampton, Ontario
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other:		Certification Agency Certificate FL7006_R9_C_CAC_FM Letter - ASTM d3161 letter - 4-15-2015 .pdf FL7006_R9_C_CAC_FM Letter - ASTM d3462 letter - 5.6.15.pdf FL7006_R9_C_CAC_FM Letter - ASTM E 108 letter - 5.3.15 .pdf Quality Assurance Contract Expiration Date 12/31/2020 Installation Instructions FL7006_R9_II_Hip and Ridge Cap Shingle Installation Instructions.pdf FL7006_R9_II_IKO-133-02-01 Letter - Installation Instructions for FBC FL7006.pdf Verified By: Duc T Nguyen PE 65034 Created by Independent Third Party: No Evaluation Reports Created by Independent Third Party:
7006.3	Leading Edge Plus Asphalt Shingle Starter Strip	One piece fiberglass asphalt shingle used as a starter strip at the bottom of a roof system manufactured in Brampton and Hawkesbury, Ontario plants
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other:		Certification Agency Certificate FL7006_R9_C_CAC_FM Letter - ASTM d3161 letter - 4-15-2015 .pdf FL7006_R9_C_CAC_FM Letter - ASTM d3462 letter - 5.6.15.pdf FL7006_R9_C_CAC_FM Letter - ASTM E 108 letter - 5.3.15 .pdf Quality Assurance Contract Expiration Date 12/31/2020 Installation Instructions FL7006_R9_II_IKO-133-02-01 Letter - Installation Instructions for FBC FL7006.pdf

		FL7006 R9 II Roofing-Products-Leading-Edge-Plus-Application-EN(1).pdf Verified By: Duc T Nguyen PE 65034 Created by Independent Third Party: No Evaluation Reports Created by Independent Third Party:
7006.4	Marathon 25 AR, CRC Superglass M25AR	3 tab fiberglass asphalt shingle manufactured at IKO's Brampton, Ontario, Hawkesbury Ont., Toronto, Ont.; Sylacauga, AL and Kanakakee, IL plants
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other:		Certification Agency Certificate FL7006 R9 C CAC FM Letter - ASTM d3161 letter - 4-15-2015 .pdf FL7006 R9 C CAC FM Letter - ASTM d3462 letter - 5 6 15.pdf FL7006 R9 C CAC FM Letter - ASTM E 108 letter - 5 3 15 .pdf Quality Assurance Contract Expiration Date 12/20/2020 Installation Instructions FL7006 R9 II IKO-133-02-01 Letter - Installation Instructions for FBC FL7006.pdf Verified By: Duc T Nguyen 65034 Created by Independent Third Party: No Evaluation Reports Created by Independent Third Party:

[Back](#)

[Next](#)

[Contact Us :: 1940 North Monroe Street, Tallahassee FL 32399 Phone: 850-487-1824](#)

The State of Florida is an AA/EEO employer. [Copyright 2007-2013 State of Florida.](#) :: [Privacy Statement](#) :: [Accessibility Statement](#) :: [Refund Statement](#)

Under Florida law, email addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions, please contact 850.487.1395.
 *Pursuant to Section 455.275(1), Florida Statutes, effective October 1, 2012, licensees licensed under Chapter 455, F.S. must provide the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public. To determine if you are a licensee under Chapter 455, F.S., please click [here](#).

Product Approval Accepts:





CONSTRUCTION MATERIALS TECHNOLOGIES

March 30, 2015

IKO Industries, Ltd
120 Hay Rd.
Wilmington, DE 19809

Re: FBC FL7006

Sir(s),

PRI Construction Materials Technologies has completed a technical review and attached sealed shingle instructions in compliance the 2014 Florida Building Code.

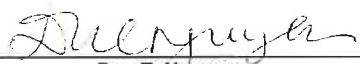
This review was completed based on the receipt of following evidence from IKO Industries, Ltd:

- 1) IKO Shingle Application Instructions – 3-Tab Shingles
(EN-3Tab_Applins_8AGXEFS-2012-11_reformatted 2013-02-rev07/13-Florida)
- 2) IKO Laminated Shingles Application Instructions
(EN-Laminated_Applins_8TTEFS-2012-04_reformatted 2013-02-rev07/13-Florida)
- 3) IKO Hip and Ridge 12 Application Instructions
(EN-HipandRidge12_3HRTri-2013-08_reformatted 2013-08)
- 4) IKO Leading Edge Plus Shingle Application Instructions
(EN-3LEP-Tri-2012-06_reformatted 2013-03)
- 5) ASTM D3161 Test Report (FM Approvals Project No. 3040947)

The attached instructions should be used in conjunction with the published manufacturer's application instructions and applicable code. In the event the instructions conflict, these instructions shall govern.

Statement of Independence: PRI Construction Materials Technologies and/or Duc T. Nguyen, FL P.E. do not have nor plan to acquire a financial interest in any company manufacturing or distributing products for which the test reports are issued.

Signed: 
Brad Grzybowski
Managing Director

Signed: 
Duc T. Nguyen
Florida Registered Professional Engineer
P.E. Number: 65034

Date: April 30, 2015

Date: April 30, 2015

- Attachments:
- A) IKO Shingle Application Instructions - 3-Tab
 - B) IKO Laminated Shingles Application Instructions
 - C) IKO Hip and Ridge 12 Application Instructions
 - D) IKO Leading Edge Plus Application Instructions

IKO-133-02-01

IKO Shingle Application Instructions – 3-Tab Shingles (ASTM D3161, Class F – IKO Marathon 25 AR and CRC Superglass M25AR)

NOTE: THESE INSTRUCTIONS SHALL BE USED IN CONJUNCTION WITH IKO'S PUBLISHED APPLICATION INSTRUCTIONS AND THE APPLICABLE CODE. IN THE EVENT THE INSTRUCTION CONFLICT, THESE INSTRUCTIONS WILL GOVERN.

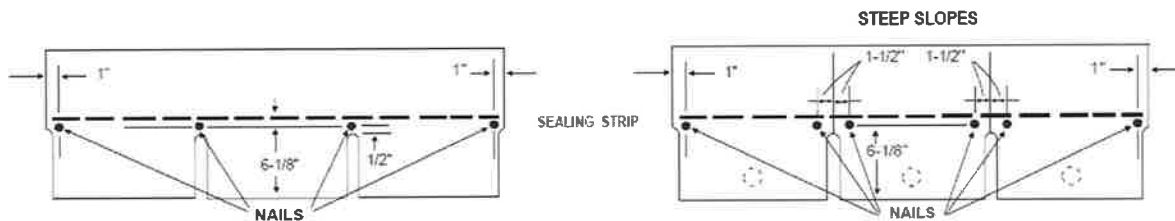
ROOF DECK: Solidly sheathed and fastened deck conforming to 2014 FBC.

UNDERLAYMENT: Applied in accordance with building code requirements. For areas where the roof slope is less than 4" per foot down to 2" per foot, use 2 layers of underlayment conforming to building code requirements, the first sheet overlapping the eave protection by 19", followed by full 36" widths overlapping each preceding course by 19" or other *Approved* underlayments in accordance with the qualified application instructions. For areas where the roof slope is 4" per foot or greater, cover the deck with one ply of underlayment laid parallel to the eaves, with 2" horizontal laps and 4" end laps. Apply metal drip edges on top of any underlay along rake edges and directly to the deck along eaves in accordance with building code requirements.

NAILING: Use galvanized (zinc coated) roofing nails, 11 or 12 gauge, with at least 3/8" diameter heads, long enough to penetrate through plywood or 3/4" into boards. Use 4 nails per shingle placed 6-1/8" above the butt edge, approx. 1" and 13" from each end and 1/2" above each cutout. Drive nails straight so that nail head is flush with, but not cutting into shingle surface.

NAILING ON STEEP SLOPES: For steep slopes of 21" per foot (60°) or more, use 6 nails per shingle placed as shown below. Ensure that no nail is within 2" of a joint/cutout of the underlying shingle. Seal down each shingle at time of application with three 1" diameter (approx. size and thickness of a quarter) spots of asphalt plastic cement placed under the shingle 2" above the bottom edge and equally spaced along the shingle. Apply plastic cement in moderation since excessive amounts may cause blistering. **CAUTION:** Shingles should seal to the underlying course when the factory applied asphalt sealant is sufficiently warmed by the heat of direct sunlight.

EXPOSURE: Installed shingles shall have a maximum average exposure of 5-5/8".



DO NOT NAIL INTO OR ABOVE THE SEALING STRIP

IKO Laminated Shingles Application Instructions (ASTM D3161, Class F – Cambridge, Cambridge HD, and CRC Biltmore AR)

NOTE: THESE INSTRUCTIONS SHALL BE USED IN CONJUNCTION WITH IKO'S PUBLISHED APPLICATION INSTRUCTIONS AND THE APPLICABLE CODE. IN THE EVENT THE INSTRUCTION CONFLICT, THESE INSTRUCTIONS WILL GOVERN.

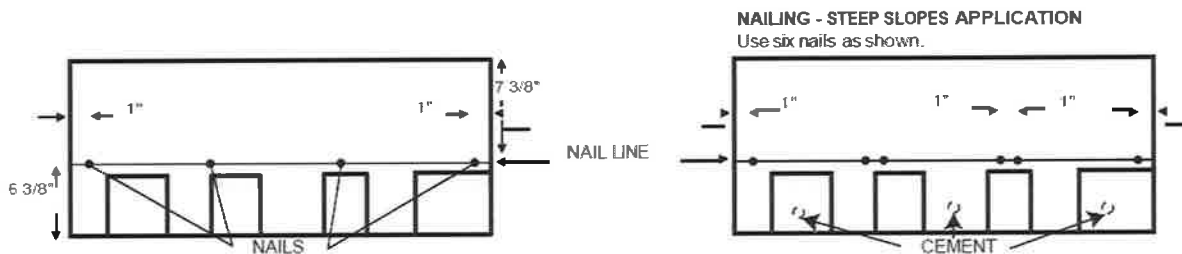
ROOF DECK: Solidly sheathed and fastened deck conforming to 2014 FBC.

UNDERLAYMENT: Applied in accordance with building code requirements. For areas where the roof slope is less than 4" per foot down to 2" per foot, use 2 layers of underlayment conforming to building code requirements, the first sheet overlapping the eave protection by 19", followed by full 36" widths overlapping each preceding course by 19" or other *Approved* underlayments in accordance with the qualified application instructions. For areas where the roof slope is 4" per foot or greater, cover the deck with one ply of underlayment laid parallel to the eaves, with 2" horizontal laps and 4" end laps. Apply metal drip edges on top of any underlay along rake edges and directly to the deck along eaves in accordance with building code requirements.

NAILING: Use galvanized (zinc coated) roofing nails, 11 or 12 gauge, with at least 3/8" diameter heads, long enough to penetrate through plywood or 3/4" into boards. Use 4 nails per shingle placed in the nail line 7-3/8" below the top edge, approx. 1" and 13" in from each end. Drive nails straight so that nail head is flush with, but not cutting into shingle surface.

NAILING ON STEEP SLOPES: For steep slopes of 21" per foot (60°) or more, use 6 nails per shingle placed as shown below. Ensure that no nail is within 2" of a joint/cutout of the underlying shingle. Seal down each shingle at time of application with three 1" diameter (approx. size and thickness of a quarter) spots of asphalt plastic cement placed under the shingle 2" above the bottom edge and equally spaced along the shingle. Apply plastic cement in moderation since excessive amounts may cause blistering. **CAUTION:** Shingles should seal to the underlying course when the factory applied asphalt sealant is sufficiently warmed by the heat of direct sunlight.

EXPOSURE: Installed shingles shall have a maximum average exposure of 5-7/8".



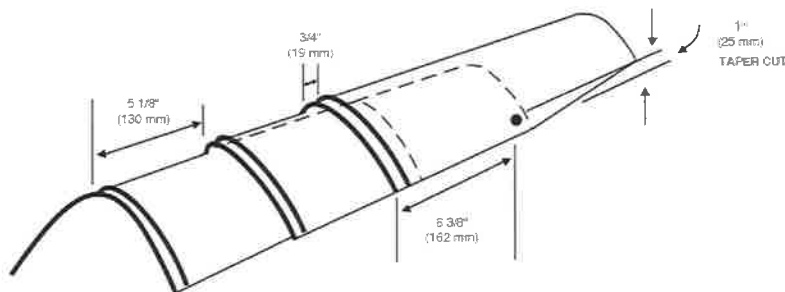
PROPER APPLICATION REQUIRES THAT THE NAILS PENETRATE BOTH THE OVERLAY AND UNDERLAY PORTIONS OF THE SHINGLE

IKO Hip and Ridge 12 Application Instructions (ASTM D3161, Class F – IKO Hip and Ridge 12)

NOTE: THESE INSTRUCTIONS SHALL BE USED IN CONJUNCTION WITH IKO'S PUBLISHED APPLICATION INSTRUCTIONS AND THE APPLICABLE CODE. IN THE EVENT THE INSTRUCTION CONFLICT, THESE INSTRUCTIONS WILL GOVERN.

Cut hip and ridge shingles into thirds, using the perforation marks as a cutting guide. These shingles are designed for a 5 1/8" (130 mm) exposure. (For a neater appearance, the top of each side of each piece has been factory trimmed on a 1" (25 mm) taper (see drawing). Bend each piece over the hip or ridge, and nail 5 5/8" (143 mm) above the butt edge 1" (25 mm) in from each edge, exposing each piece 5 1/8" (130 mm). Apply hip pieces starting at the lower end of the hip, working up toward the ridge. On hip roofs, apply ridge pieces starting at each end, meeting in the middle. On gable roofs, apply ridge pieces starting at the end opposite to the prevailing wind direction and continue to the other end. Note: To obtain a three-dimensional effect, (which is recommended, but not required), apply hip and ridge shingles double thickness by stacking 2 pieces on top of one another, the lower piece extending about 3/4" (19 mm) further than the top piece (see diagram). The final shingle should be set in cement, and the exposed nail heads of the final shingle should be covered with cement. Prior to application in cold weather, storing the shingles in a heated area will allow for easier bending.

NOTE: SHINGLES MUST BE APPLIED PROPERLY. THEY ARE DESIGNED FOR USE AS HIP AND RIDGE SHINGLES ONLY, AND SHOULD NOT BE USED FOR ANY OTHER APPLICATIONS. WE ASSUME NO RESPONSIBILITY FOR LEAKS OR DEFECTS RESULTING FROM POOR APPLICATION OR FAILURE TO PROPERLY PREPARE THE SURFACE TO BE ROOFED OVER, OR FAILURE TO PROVIDE PROPER VENTILATION IN ACCORDANCE WITH MINIMUM PROPERTY STANDARDS REQUIREMENTS. REVIEW ALL APPLICABLE BUILDING CODES, MINIMUM PROPERTY STANDARDS, AND REQUIREMENTS PRIOR TO APPLYING THESE SHINGLES USING THESE APPLICATION INSTRUCTIONS.



IKO Leading Edge Plus Application Instructions **(ASTM D3161, Class F – IKO Leading Edge Plus)**

NOTE: THESE INSTRUCTIONS SHALL BE USED IN CONJUNCTION WITH IKO'S PUBLISHED APPLICATION INSTRUCTIONS AND THE APPLICABLE CODE. IN THE EVENT THE INSTRUCTION CONFLICT, THESE INSTRUCTIONS WILL GOVERN.

1. Apply any underlayment, eave protection, valley flashings, or drip edges to roof deck as required.
2. Each 39 3/8" x 13 1/4" (1000 mm x 336 mm) IKO Leading Edge Plus strip is perforated lengthwise for separation into two (2) shingles. Take one IKO Leading Edge Plus strip and fold flat at perforation to separate.
3. Take one of the separated shingles 39 3/8" x 6 5/8" (1000 mm x 168 mm) and remove approximately 20"(500 mm). Install this shingle on the lower left corner of the roof deck, granule side up, with the factory installed sealant adjacent to the eaves. The shingle should overhang the rake edge and eaves by a nominal 1/4" (6 mm) minimum. Fasten the shingle to the roof deck with nails located 3" to 4" (75 mm to 100 mm) from the eave edge and 1" (25 mm) in from each end.
4. Take the leftover 20" (500 mm) piece shingle. Rotate the piece and align it vertically up the rake edge with the factory installed sealant adjacent to the outer edge of the roof. The shingle should overhang the rake edge by a nominal 1/4" (6 mm) minimum. Fasten the shingle to the roof deck with fasteners located 3" to 4" (75 mm to 100 mm) from the rake edge and 1" (25 mm) in from each end.
5. Repeat Steps 3 – 4 for the right lower corner of the roof deck.

NAILING: Use galvanized (zinc coated) roofing nails, 11 or 12 gauge, with at least 3/8" (9 mm) diameter heads, long enough to penetrate through plywood or 3/4" (20 mm) into boards. Use 4 nails per shingle placed 3" to 4" (75 mm to 100 mm) from the eave edge and approximately 1" and 13" (25 mm and 330 mm) in from each end.

6. Apply full-length IKO Leading Edge Plus shingles to the remaining eave edges of the roof deck. Install the shingles granule side up with the factory applied sealant adjacent to the eaves. The shingles should overhang the rake edge and eaves by a nominal 1/4" (6 mm) minimum. Fasten the shingles to the roof deck with nails located 3" to 4" (75 mm to 100 mm) from the eave edge, 4 nails per shingle.
7. Apply roof shingles as per the instructions printed on each product's package. Make certain the first course of field shingle lies flush with the edges of the fastened IKO Leading Edge Plus. In this way, the sealant on the IKO Leading Edge Plus shingles will adhere to the first-course field shingles and help keep them from lifting in high winds.

UNDERLAYMENT



[BCIS Home](#) |
 [Log In](#) |
 [User Registration](#) |
 [Hot Topics](#) |
 [Submit Surcharge](#) |
 [Stats & Facts](#) |
 [Publications](#) |
 [FBC Staff](#) |
 [BCIS Site Map](#) |
 [Links](#) |
 [Search](#)



Product Approval

USER: Public User

License efficiently. Regulate fairly.

[Product Approval Menu](#) >
 [Product or Application Search](#) >
 [Application List](#) >
 Application Detail

OFFICE OF THE SECRETARY

FL #	FL16226-R2
Application Type	Revision
Code Version	2014
Application Status	Approved
Comments	
Archived	
Product Manufacturer	Atlas Roofing Corporation
Address/Phone/Email	2000 RiverEdge Parkway Suite 800 Atlanta, GA 30328 (770) 946-4571 mcollins@atlasroofing.com
Authorized Signature	Meldrin Collins mcollins@atlasroofing.com
Technical Representative	
Address/Phone/Email	
Quality Assurance Representative	
Address/Phone/Email	
Category	Roofing
Subcategory	Underlayments
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer ✓ Evaluation Report - Hardcopy Received
Florida Engineer or Architect Name who developed the Evaluation Report	Zachary R. Priest
Florida License	PE-74021
Quality Assurance Entity	UL LLC
Quality Assurance Contract Expiration Date	12/31/2020
Validated By	Locke Bowden ✓ Validation Checklist - Hardcopy Received
Certificate of Independence	FL16226_R2_COI_ATL13001.2_2014_FBC_Product_Evaluation_Report_FINAL.pdf
Referenced Standard and Year (of Standard)	
Equivalence of Product Standards Certified By	
Sections from the Code	1507.2.3

1507.2.8
 1507.3.3
 1507.4.5.1
 1507.4.5.2
 1507.5.3
 1507.5.3.2
 1507.7.3
 1507.7.3.2
 1507.8.3
 1507.8.3.2
 1507.9.3
 1507.9.3.2
 1507.9.5
 1518.4

Product Approval Method Method 2 Option B

Date Submitted 04/19/2015

Date Validated 04/20/2015

Date Pending FBC Approval 04/23/2015

Date Approved 06/22/2015

Summary of Products		
FL #	Model, Number or Name	Description
16226.1	Gorilla Guard EverFelt Spec 30	ASTM D 6757 & ASTM D 226, Type II underlayment
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other: See evaluation report for limits of use		Installation Instructions FL16226 R2 II ATL13001.2 2014 FBC Product Evaluation Report - FINAL.pdf Verified By: Zachary R. Priest 74021 Created by Independent Third Party: Yes Evaluation Reports FL16226 R2 AE ATL13001.2 2014 FBC Product Evaluation Report - FINAL.pdf Created by Independent Third Party: Yes
16226.2	SUMMIT & SUMMIT 60	Synthetic underlyaments for steep slope roofing
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other: See evaluation report for limits of use.		Installation Instructions FL16226 R2 II ATL13001.2 2014 FBC Product Evaluation Report - FINAL.pdf Verified By: Zachary R. Priest 74021 Created by Independent Third Party: Yes Evaluation Reports FL16226 R2 AE ATL13001.2 2014 FBC Product Evaluation Report - FINAL.pdf Created by Independent Third Party: Yes

Contact Us :: 1940 North Monroe Street, Tallahassee FL 32399 Phone: 850-487-1824

The State of Florida is an AA/EEO employer. [Copyright 2007-2013 State of Florida.](#) :: [Privacy Statement](#) :: [Accessibility Statement](#) :: [Refund Statement](#)

Under Florida law, email addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions, please contact 850.487.1395.
 *Pursuant to Section 455.275(1), Florida Statutes, effective October 1, 2012, licensees licensed under Chapter 455, F.S., must provide the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public.
 To determine if you are a licensee under Chapter 455, F.S., please click [here](#).

Product Approval Accepts:





EVALUATION REPORT

2014 FLORIDA BUILDING CODE

Manufacturer: Atlas Roofing Corporation
 2000 Riveredge Parkway, Suite 800
 Atlanta, GA 30328
 (770) 612-6267
<http://www.atlasroofing.com>

Issued March 30, 2015

Manufacturing Plants: Meridian, MS
 Calgary, Alberta Canada
 Gujarat, India

Quality Assurance: UL LLC (QUA9625)

SCOPE

Category: Roofing
Subcategory: Underlayments
Code Sections: 1507.2.3, 1507.2.8, 1507.3.3, 1507.4.5.1, 1507.4.5.2, 1507.5.3, 1507.5.3.2, 1507.7.3, 1507.3.2, 1507.8.3, 1507.8.3.2, 1507.9.3, 1507.9.3.2, 1507.9.5, 1518.4
Properties: Physical properties

REFERENCES

<u>Entity</u>	<u>Report No.</u>	<u>Standard</u>	<u>Year</u>
PRI Construction Materials Technologies (TST5878)	ATL-033-02-01	ASTM D 226	2006
PRI Construction Materials Technologies (TST5878)	ATL-101-02-01	ASTM D 6757	2007
		ASTM D 226	2006
		TAS 117(B)	1995
		ASTM D 1781	1998(2012)
PRI Construction Materials Technologies (TST5878)	ATL-134-02-01	ASTM D 6757	2007
		ASTM D 226	2006
		ASTM D 4869	2005e1

PRODUCT DESCRIPTION AND APPLICATION

Gorilla Guard® EverFelt Spec 30 ASTM D 6757 and ASTM D 226, Type II mechanically fastened underlayment made from asphalt-saturated organic felt reinforced with glass fiber for steep slope roof applications. Rolls are a nominal 36-inch wide by 72-ft long. Unless otherwise noted, the following application details shall be followed for New and Existing construction.

- Deck: In accordance with FBC requirements; New construction in the HVHZ shall be in. 19/32 in. plywood
- Min. slope: 2:12 and in accordance with FBC requirements
- Attachment for 2:12 to 4:12: Mechanically fasten to deck in accordance with Manufacturer's published application instructions and FBC requirements; Min. 19 in. head lap and 6 in. end lap.
- Attachment (HVHZ) for > 4:12: Mechanically fasten to deck in accordance with Manufacturer's published application instructions and FBC (HVHZ) requirements; Min. 4 in. head lap and 6 in. end lap.
- Attachment (Non-HVHZ) > 4:12: Mechanically fasten to deck in accordance with Manufacturer's published application instructions and FBC requirements; Min. 2 in. head lap and 4 in. end lap

Gorilla Guard® EverFelt Spec 30 - Continued	Allowable roof coverings:	Asphalt shingles, metal roof panels and shingles, wood shakes and shingles, and slate shingles. Clay and concrete tiles are allowable when installed with ASTM D 6830, ASTM D 249 organic cap sheet, or other <i>approved</i> underlayments in accordance with FBC requirements.
Summit®	ASTM D 226, Type II alternative underlayment made from inorganic, woven polypropylene fabric dual-coated with resin for steep slope roof applications. Rolls are a nominal 48-inch wide by 250-ft long. Unless otherwise noted, the following application details shall be followed for New and Existing construction.	
	Deck:	In accordance with FBC requirements; New construction in the HVHZ shall be in. 19/32 in. plywood
	Min. slope:	2:12 and in accordance with FBC requirements
	Attachment for 2:12 to 4:12:	Mechanically fasten to deck in accordance with Manufacturer's published application instructions and FBC requirements; Min. 24 in. head lap and 12 in. end lap.
	Attachment > 4:12:	Mechanically fasten to deck in accordance with Manufacturer's published application instructions and FBC requirements; Min. 4 in. head lap and 12 in. end lap
	Allowable roof coverings:	Asphalt shingles, metal roof panels and shingles, wood shakes and shingles, and slate shingles.
Summit® 60	ASTM D 6757, ASTM D 4869, Type II and ASTM D 226, Type II alternative underlayment made from inorganic polypropylene fabric with woven polymeric scrim for steep slope roof applications. Rolls are a nominal 48-inch wide by 250-ft long. Unless otherwise noted, the following application details shall be followed for New and Existing construction.	
	Deck:	In accordance with FBC requirements; New construction in the HVHZ shall be in. 19/32 in. plywood
	Min. slope:	2:12 and in accordance with FBC requirements
	Attachment for 2:12 to 4:12:	Mechanically fasten to deck in accordance with Manufacturer's published application instructions and FBC requirements; Min. 24 in. head lap and 12 in. end lap.
	Attachment > 4:12:	Mechanically fasten to deck in accordance with Manufacturer's published application instructions and FBC requirements; Min. 4 in. head lap and 12 in. end lap
	Allowable roof coverings:	Asphalt shingles, metal roof panels and shingles, wood shakes and shingles, and slate shingles.

LIMITATIONS

- 1) Fire Classification is not within the scope of this evaluation.
- 2) Wind uplift resistance is not within scope of this evaluation.
- 3) Installation of the evaluated product shall comply with this report, the FBC, and the manufacturer's published application instructions. Where discrepancies exist between these sources, the more restrictive and FBC compliant installation detail shall prevail.
- 4) Deck substrates shall be clean, dry, and free from any irregularities and debris. All fasteners in the deck shall be checked for protrusion and corrected prior to underlayment application.
- 5) The roof deck shall be constructed of closely fitted sheathing for new or existing construction. Roof deck shall be installed in accordance with FBC requirements.
- 6) All underlayments shall be installed with the roll length parallel to the eave, starting at the eave, and lapped in success courses installed up the deck in a manner that effectively sheds water from the deck. End laps shall be staggered between courses in accordance with the manufacturer's application instructions.
- 7) Roof coverings shall not be adhered directly to the underlayment.
- 8) The underlayment may be used as described in other current FBC product approval documents.
- 9) The underlayment shall be exposed on the roof deck for a maximum 30 days unless otherwise stated.
- 10) All products listed in this report shall be manufactured under a quality assurance program in compliance with Rule 61G20-3.

COMPLIANCE STATEMENT

The products evaluated herein by Zachary R. Priest, P.E. have demonstrated compliance with the 2014 Florida Building Code as evidenced in the referenced documents submitted by the named manufacturer.



2015.03.3
0 09:12:02
-04'00'

Zachary R. Priest, P.E.
Florida Registration No. 74021
Organization No. ANE9641

CERTIFICATION OF INDEPENDENCE

CREEK Technical Services, LLC does not have, nor will it acquire, a financial interest in any company manufacturing or distributing products under this evaluation.

CREEK Technical Services, LLC is not owned, operated, or controlled by any company manufacturing or distributing products under this evaluation.

Zachary R. Priest, P.E. does not have, nor will acquire, a financial interest in any company manufacturing or distributing products under this evaluation.

Zachary R. Priest, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.

END OF REPORT



[BCIS Home](#)
[Log In](#)
[User Registration](#)
[Hot Topics](#)
[Submit Surcharge](#)
[Stats & Facts](#)
[Publications](#)
[FBC Staff](#)
[BCIS Site Map](#)
[Links](#)
[Search](#)



Product Approval
USER: Public User

License efficiently. Regulate fairly.

[Product Approval Menu](#) >
 [Product or Application Search](#) >
 [Application List](#) >
 Application Detail



FL #	FL12198-R3
Application Type	Revision
Code Version	2014
Application Status	Approved

*Approved by DBPR. Approvals by DBPR shall be reviewed and ratified by the POC and/or the Commission if necessary.

Comments
Archived

Product Manufacturer	KAYCAN LTD
Address/Phone/Email	1 Memorial Drive Richford, VT 05476 (406) 553-6818 Ext 0 alex.jovanovic@kpproducts.com

Authorized Signature	Jovanovic Alex alex.jovanovic@kpproducts.com
----------------------	---

Technical Representative	Joe Lundine
Address/Phone/Email	402 Boyer St Williston, VT 05495 (662) 252-9991 joe.lundine@kpproducts.com

Quality Assurance Representative	Joe Lundine
Address/Phone/Email	402 Boyer St Williston, VT 05495 (662) 252-9991 joe.lundine@kpproducts.com

Category	Panel Walls
Subcategory	Soffits

Compliance Method	Certification Mark or Listing
-------------------	-------------------------------

Certification Agency	Miami-Dade BCCO - CER
Validated By	Miami-Dade BCCO - VAL



Referenced Standard and Year (of Standard)	Standard	Year
	TAS 202	1994
	TAS 203	1994

Equivalence of Product Standards
Certified By

Product Approval Method Method 1 Option A

Date Submitted 09/02/2015

Date Validated 09/04/2015

Date Pending FBC Approval

Date Approved 09/11/2015

Summary of Products		
FL #	Model, Number or Name	Description
12198.1	Aluminum Soffit SP-600	SP-600 16" Vented Aluminum Soffit
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +55/-35 Other: Maximum Panel Dimensions: 21-1/2" x 16.515"		Certification Agency Certificate FL12198_R3_C_CAC_15061215.pdf Quality Assurance Contract Expiration Date 06/01/2016 Installation Instructions FL12198_R3_II_15061215.pdf Verified By: Miami-Dade BCCO - CER Created by Independent Third Party: Evaluation Reports Created by Independent Third Party:
12198.2	Vinyl Soffit D5	D5 10" Vented Vinyl Soffit
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +55/-35 Other: Maximum Panel Dimensions: 21-1/2" x 11.384"		Certification Agency Certificate FL12198_R3_C_CAC_15061216.pdf Quality Assurance Contract Expiration Date 04/20/2016 Installation Instructions FL12198_R3_II_15061216.pdf Verified By: Miami-Dade BCCO - CER Created by Independent Third Party: Evaluation Reports Created by Independent Third Party:
12198.3	Vinyl Soffit T4	T4 12" Vented Vinyl Soffit
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +55/-35 Other: Maximum Panel Dimensions: 21-1/2" x 13.352"		Certification Agency Certificate FL12198_R3_C_CAC_15061216.pdf Quality Assurance Contract Expiration Date 04/20/2016 Installation Instructions FL12198_R3_II_15061216.pdf Verified By: Miami-Dade BCCO - CER Created by Independent Third Party: Evaluation Reports Created by Independent Third Party:

Contact Us :: 1940 North Monroe Street, Tallahassee FL 32399 Phone: 850-487-1824

The State of Florida is an AA/EEO employer. Copyright 2007-2013 State of Florida. :: [Privacy Statement](#) :: [Accessibility Statement](#) :: [Refund Statement](#)

Under Florida law, email addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions, please contact 850.487.1395. *Pursuant to Section 455.275(1), Florida Statutes, effective October 1, 2012, licensees licensed under Chapter 455, F.S. must provide the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public. To determine if you are a licensee under Chapter 455, F.S., please click [here](#).

Product Approval Accepts:





DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES (RER)
BOARD AND CODE ADMINISTRATION DIVISION
NOTICE OF ACCEPTANCE (NOA)

MIAMI-DADE COUNTY
PRODUCT CONTROL SECTION
11805 SW 26 Street, Room 208
Miami, Florida 33175-2474
T (786) 315-2590 F (786) 315-2599
www.miamidade.gov/economy

Kaycan
1 Memorial Drive.
Richford, VT 05476

SCOPE: This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed and accepted by Miami-Dade County RER-Product Control Section to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control Section (In Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to have this product or material tested for quality assurance purposes. If this product or material fails to perform in the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately revoke, modify, or suspend the use of such product or material within their jurisdiction. RER reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Section that this product or material fails to meet the requirements of the applicable building code. This product is approved as described herein, and has been designed to comply with the Florida Building Code, including the High Velocity Hurricane Zone.

DESCRIPTION: Model SP-600 16" Aluminum Vented Soffit

APPROVAL DOCUMENT: Drawing No. KAY0003, titled "SP-600 16" Aluminum Soffit - Vented", sheets 1 through 4 of 4, dated 12/27/2011, with revision 2 dated 03/17/2015, prepared by the manufacturer, signed and sealed by Robert J. Amoruso, P.E., bearing the Miami-Dade County Product Control revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Section.

MISSILE IMPACT RATING: None

LABELING: Each piece shall bear a permanent label marked at not more than 4' o.c. with the manufacturer's name or logo, Pointe-Claire, QC, Canada and following statement: "Miami-Dade County Product Control Approved", per FBC 1710.9.2 and 1710.9.3.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official. This NOA revises NOA # 12-0124.04 and consists of this page 1 and evidence page E-1, as well as approval document mentioned above.

The submitted documentation was reviewed by Carlos M. Utrera, P.E.



[Signature]
108/20/2015

NOA No. 15-0612.15
Expiration Date: June 01, 2016
Approval Date: August 27, 2015
Page 1

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

A. DRAWINGS

1. Drawing No. **KAY0003**, titled "SP-600 16" Aluminum Soffit – Vented", sheets 1 through 4 of 4, dated 12/27/2011, with revision 3 dated 03/17/2015, prepared by the manufacturer, signed and sealed by Robert J. Amoruso, P.E.

B. TESTS *"Submitted under NOA # 05-0802.03"*

1. Test report of Cyclic Load Pressure Test per TAS 203 and test report of Uniform Static Load Test per TAS 202 on Aluminum Soffit SP-600 prepared by Architectural Testing, Test Report No. **55982.02-122-18**, dated 07/18/2005, signed and sealed by S. M. Urich, P.E.
2. Test report of Tensile Test per ASTM E8 on Aluminum Vented Soffit, prepared by Architectural Testing, Test Report No. **55982.03-122-18**, dated 04/26/2005, signed and sealed by Joseph A. Reed, P.E.

C. CALCULATIONS *"Submitted under NOA # 12-0124.04"*

1. Anchor calculations prepared by PTC Product Design Group, LLC, dated 12/27/2011, signed and sealed by Robert J. Amoruso, P.E.

"Submitted under NOA # 05-0802.03"
2. Anchor calculations prepared by H. R. Engineering, Inc., pages 1 through 3, dated 07/25/2005, signed and sealed by Allen N. Reeves, P.E.

D. QUALITY ASSURANCE

1. Miami-Dade Department of Regulatory and Economic Resources (RER)

E. MATERIAL CERTIFICATIONS

1. None.

F. STATEMENTS

1. Statement letter of code conformance to 5th edition (2014) FBC and of no financial interest, prepared by PTC Product Design Group, LLC, dated 03/17/2015, signed and sealed by Robert J. Amoruso, P.E.

"Submitted under NOA # 12-0124.04"
2. Statement letter of code conformance to 2010 FBC and no financial interest, prepared by PTC Product Design Group, LLC, dated 01/19/2012, signed and sealed by Robert J. Amoruso, P.E.

"Submitted under NOA # 11-0325.03"
3. Distributor agreement dated 04/25/2011.


08/20/2015

Carlos M. Utrera, P.E.
Product Control Examiner
NOA No. 15-0612.15
Expiration Date: June 01, 2016
Approval Date: August 27, 2015

KAYCAN BUILDING PRODUCTS

SP-600 16" ALUMINUM SOFFIT - VENTED

INSTALLATION ANCHORAGE DETAILS

GENERAL NOTES:

- THIS PRODUCT HAS BEEN TESTED AND DESIGNED TO COMPLY WITH THE CURRENT EDITION OF THE FLORIDA BUILDING CODE (FBC) - BUILDING AND RESIDENTIAL VOLUMES INCLUDING THOSE SECTIONS OF THE FBC PERTAINING TO THE HIGH VELOCITY HURRICANE ZONE (HVHZ) AT THE DESIGN PRESSURE(S) STATED HEREIN. THE PRODUCT WAS TESTED TO TAS-202 AND TAS-203. IMPACT TESTING TO TAS-201 IS NOT REQUIRED FOR SOFFIT. STRUCTURAL TEST RESULTS BASED ON TAS 202 WERE DIVIDED BY 1.5 AS REQUIRED BY THE CURRENT EDITION OF THE FBC - BUILDING AND RESIDENTIAL VOLUMES.
- THE PRODUCT DETAILS CONTAINED HEREIN ARE BASED UPON SIGNED AND SEALED ARCHITECTURAL TESTING REPORT #55982.02-122-18, INCLUDING ASSOCIATED LABORATORY STAMPED DRAWINGS.
- ADEQUACY OF THE EXISTING STRUCTURAL CONCRETE, MASONRY AND WOOD FRAMING COMPRISING THE ATTACHMENT SUBSTRATE FOR THE SOFFIT SHALL BE DETERMINED TO BE CAPABLE OF WITHSTANDING AND TRANSFERRING APPLIED PRODUCT LOADS TO THAT STRUCTURE AND IS THE RESPONSIBILITY OF THE ARCHITECT OR ENGINEER OF RECORD FOR THE PROJECT.
- OVERHANG RECEIVING ALUMINUM SOFFIT SHALL BE CHECKED FOR STRUCTURAL INADEQUACY, CRACKS OR DEFECTS THAT SHALL BE ELIMINATED.
- INSTALLATION OF SOFFIT ACCESSORIES AND ACCESSORIES SUCH AS CORNER POSTS, STARTER STRIPS AND TRIM AROUND OPENINGS SHALL BE DONE IN ACCORDANCE WITH THE CURRENT EDITION OF THE FLORIDA BUILDING CODE - BUILDING AND RESIDENTIAL VOLUMES AND THE MANUFACTURER'S INSTRUCTIONS.
- SITE CONDITIONS THAT DEVIATE FROM THE DETAILS OF THIS DRAWING REQUIRE FURTHER ENGINEERING EVALUATION BY A LICENSED ENGINEER OR REGISTERED ARCHITECT.
- LABELLED IN ACCORDANCE WITH THE CURRENT EDITION OF THE FLORIDA BUILDING CODE - BUILDING AND RESIDENTIAL VOLUMES.
- SOFFIT NET FREE AREA IN ACCORDANCE WITH THE CURRENT EDITION OF THE FLORIDA BUILDING CODE - BUILDING AND RESIDENTIAL VOLUMES.
 - 8.1. 8.7 SQ INCH LINEAL FT.

INSTALLATION NOTES:

- ANCHORS SHALL BE THE TYPE, SIZE, EMBEDMENT AND EDGE DISTANCE SHOWN HEREIN FOR RESPECTIVE SUBSTRATE.
- INSTALLATION ANCHORS SHALL BE AS SHOWN ON THE "BATTEN INSTALLATION" AND "SOFFIT INSTALLATION" SECTIONS ON SHEETS 3 AND 4.
- MINIMUM EMBEDMENT AND EDGE DISTANCE EXCLUDE WALL FINISHES (INCLUDING BUT NOT LIMITED TO STUCCO, FOAM, BRICK VENEER AND SIDING).
- FOR INSTALLATION OF BATTEN TO WOOD STRUCTURE USE #8 x 3" WOOD SCREW OR #8 x 3" TAPPING SCREW. PLACE ONE SCREW PER LOCATION AND MAXIMUM 24" O.C. ALONG BATTEN LENGTH.
- FOR INSTALLATION OF SOFFIT TO BATTEN USE 0.17" DIAMETER x 1-1/2" LONG SMOOTH, SCREW OR RING SHANK ROOFING NAIL WITH 3/8" DIAMETER HEAD.
- ALL FASTENERS SHALL HAVE CORROSION RESISTANT COATINGS OR BE MADE OF CORROSION RESISTANT MATERIALS COMPATIBLE WITH THE SUBSTRATE MATERIALS.

ALUMINUM SOFFIT SPECIFICATIONS:

- KAYCAN BUILDING PRODUCTS ALUMINUM SOFFIT IS MANUFACTURED BY ALUMINUM PRODUCTS, 3075 TRANS-CANADA HWY, POINTE-CLAIRE, QC H9R 1B4, CANADA.
- SP-600 16" SOFFIT - VENTED
 - MATERIAL: ALUMINUM 3004-H19
 - WALL THICKNESS: 0.015"
 - PANEL LENGTHS: 12'-0" LONG
- TRIM
 - F-CHANNEL
 - MATERIAL: ALUMINUM
 - WALL THICKNESS: 0.022"
 - FASCIA
 - MATERIAL: ALUMINUM
 - WALL THICKNESS: 0.022"

BILL OF MATERIALS		
ITEM	DESCRIPTION	MATERIAL
1	SP-600 16" VENTED SOFFIT	ALUM. 3004-H19
2	F-CHANNEL	ALUMINUM
3	6" FASCIA	ALUMINUM
4	0.12" DIAMETER x 1-1/2" LONG ROOFING NAIL WITH 3/8" DIA. HEAD. USED TO ATTACH SOFFIT TO BATTEN	STEEL
5	#8 x 3" WOOD SCREW OR #8 x 3" TAPPING SCREW. USED TO ATTACH BATTEN TO WOOD STRUCTURE	STEEL
6	2" x 2" WOOD BATTEN	WOOD

TABLE OF CONTENT	
SHEET	DESCRIPTION
1	GENERAL AND INSTALLATION NOTES, B.O.M. AND D.P. CHART
2	APPROVED SOFFIT PROFILE AND COMPONENTS
3	SOFFIT INSTALLATION AND CROSS SECTION
4	SOFFIT INSTALLATION SECTION

DESIGN PRESSURE (PSF) RATING	
SOFFIT MODEL	DESIGN PRESSURE (PSF)
SP-600 16" ALUM. VENTED SOFFIT W/F-CHANNEL	+55.0PSF / -35.0psf

PROJECT #414-0802

KAYCAN BUILDING PRODUCTS
1 MEMORIAL DRIVE
RICHMOND, VT 05476

SP-600 16" ALUMINUM SOFFIT - VENTED
GENERAL NOTES, B.O.M. AND D.P. CHART

REVISED
DATE: 02/10/2016
BY: [Signature]

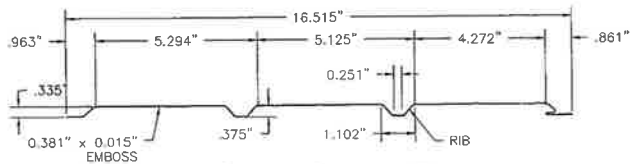
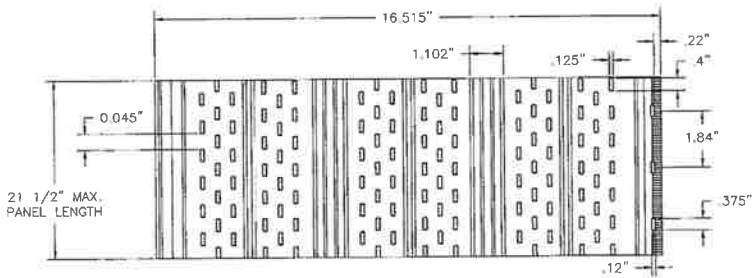
Robert J. Amosco, P.E.
Florida P.E. No. 49752



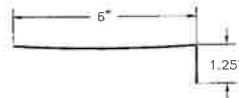
REV	DESCRIPTION	DATE
2	UPDATE TO THE PERMITS	3/17/15
1	ISSUED FOR PERMITS	3/19/12
1	ISSUED FOR PERMITS	3/19/12
1	ISSUED FOR PERMITS	3/19/12

NO.	DATE	BY	DESCRIPTION
1	02/27/11	DAVID LAY	ISSUED FOR PERMITS
2	02/27/11	DAVID LAY	ISSUED FOR PERMITS
3	02/27/11	DAVID LAY	ISSUED FOR PERMITS

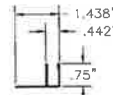
1 OF 4



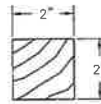
① SP-600 16" VENTED SOFFIT
ALUMINUM 3004-H19 0.015" THICK



③ 6" FASCIA
ALUMINUM 0.022" THICK



② F-CHANNEL
ALUMINUM 0.022" THICK



⑥ BATTEN
WOOD

PROJECT #414-0802

REV.	DESCRIPTION	DATE	BY
2	UPDATE TO THIS SHEET (2/14)	3/17/15	RLA
1	FOR EDDC PRODUCE	3/19/12	LJH
1	MARKED FOR CONSTRUCTION		

NAYCAN BUILDING PRODUCTS
1 MEMORIAL DRIVE
RICHMOND, VT 05476

SP-600 16" ALUMINUM SOFFIT - VENTED
APPROVED SOFFIT PROFILE AND COMPONENTS

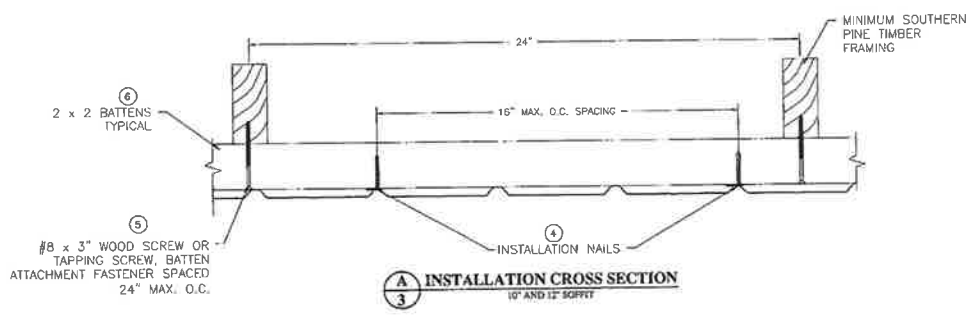
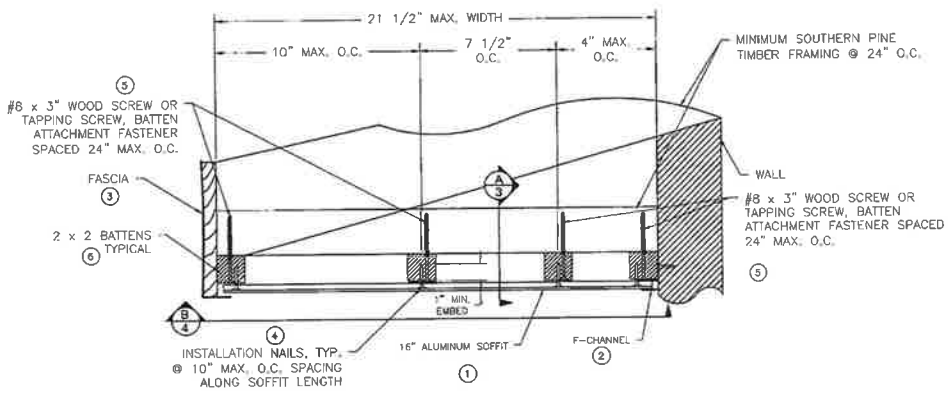
ISSUED BY	DATE	SCALE	PROJECT NO.	SHEET	OF
RLA	02/27/11	N.T.S.	MAY0003	2	4

PREPARED BY: RLA
DATE: 02/27/11
SCALE: N.T.S.
PROJECT NO.: MAY0003
SHEET: 2 OF 4

PROJECT REVISED
as complying with the Florida
Building Code
Acceptance No. 15-0412.15
Expiration Date 06/01/2016

By: *[Signature]*
Miami Code Product Control





PROJECT #14-0802	
DATE	3/18/12
BY	3 OF 4
DESCRIPTION	
REV	
1	CO. DATED 3/18/12
2	UPGRADE TO THE 2010 IRC
3/17/15	RJA

KAYCAN BUILDING PRODUCTS
 1 MEMORIAL DRIVE
 RICHMOND, VT 05476
 TITLE: SP-600 16" ALUMINUM SOFFIT - VENTED SOFFIT INSTALLATION
 DRAWN BY: JFH
 SCALE: 1/8" = 1'-0"
 DATE: 12/27/11
 PROJECT NO.: KAN0003
 SHEET: 3 OF 4

REVISIONS

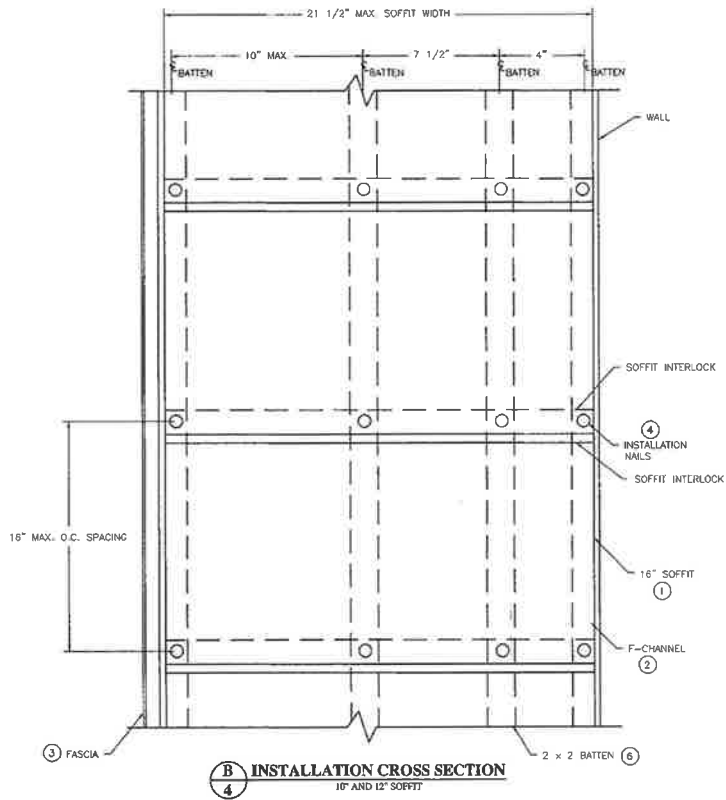
BY: [Signature]

DATE: 15-06-15

REASON: 26-01-2016

Robert J. Amoroso, P.E.
 Florida P.E. No. 49752

ROBERT JAMES AMOROSO
 LICENSE AND
 No 49752
 STATE OF
 FLORIDA
 PROFESSIONAL ENGINEER



PROJECT #414-0802	
KAYCAN BUILDING PRODUCTS 1 MEMORIAL DRIVE RICHMOND, VT 05476	DATE: 02/27/11
TITLE: SP-000 16" ALUMINUM SOFFIT - VENTED SOFFIT INSTALLATION SECTION	SCALE: N.T.S.
DESIGNED BY: T.J.H.	DRAWN BY: KAY0003
CHECKED BY: [Signature]	DATE: 3/19/12
PROJECT NO. 414-0802	BY: [Signature]
REVISED TO THE STANDARD SECTION OF THE R.C. PER TRADE PRACTICE	DATE: 3/19/12
1 UNLESS OTHERWISE INDICATED	BY: [Signature]
1 UNLESS OTHERWISE INDICATED	DATE: [Blank]

PRODUCT REVISED
 as complying with the Florida Building Code.
 Amendment No. 15-0012-15
 Effective Date: 06/10/2016
 By: [Signature]
 Model Mark Product Control





CERTIFICATE OF LIABILITY INSURANCE

12/23/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).


PRODUCER Winchester Insurance, Inc. 1425 W. Broadway (S.R. 426) P.O. Box 620969 Oviedo FL 32762-0969	CONTACT NAME: Maureen Wentworth PHONE (A/C No. Ext): (407) 365-5656 FAX (A/C No.): (407) 366-0031 E-MAIL ADDRESS: maureen@winchesterinsurance.com																				
	<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A:</td> <td>SOUTHERN-OWNERS</td> <td>10190</td> </tr> <tr> <td>INSURER B:</td> <td></td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	SOUTHERN-OWNERS	10190	INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:	
INSURER(S) AFFORDING COVERAGE		NAIC #																			
INSURER A:	SOUTHERN-OWNERS	10190																			
INSURER B:																					
INSURER C:																					
INSURER D:																					
INSURER E:																					
INSURER F:																					
INSURED Hastings Homes Inc. 3613 Bancroft Avenue Orange Orlando FL 32833-																					

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR: WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC		114682 72741408	04/22/2015	04/22/2016	EACH OCCURRENCE \$ 1,500,000 DAMAGE TO RENTED PREMISES (Fa occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 500,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		114682 72741408	04/22/2015	04/22/2016	COMBINED SINGLE LIMIT (Fa accident) \$ 500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED. RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N <input checked="" type="checkbox"/> N/A If yes, describe under DESCRIPTION OF OPERATIONS below					WC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	INMRC		114682 72741408	04/22/2015	04/22/2016	5,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER () - () - City of Belle Isle 1600 Nela Ave Belle Isle FL 32809-	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
---	--



JEFF ATWATER
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

**** CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW ****

CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation law.

EFFECTIVE DATE: 5/5/2015 **EXPIRATION DATE:** 5/4/2017
PERSON: HASTINGS KEITH E
FEIN: 562403337

BUSINESS NAME AND ADDRESS:

HASTINGS HOMES INC

3613 BANCROFT BLVD
ORLANDO FL 32833

SCOPES OF BUSINESS OR TRADE:

LICENSED GENERAL LICENSED RESIDENTIAL
CONTRACTOR CONTRACTR

Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/08/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Winchester Insurance, Inc. 1425 W. Broadway (S.R. 426) P.O. Box 620969 Oviedo FL 32762-0969	CONTACT NAME: Maureen Wentworth PHONE (A/C No. Ext): (407) 365-5656 FAX (A/C No.): (407) 366-0031 E-MAIL ADDRESS: maureen@winchesterinsurance.com													
	<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A :SOUTHERN-OWNERS</td> <td>10190</td> </tr> <tr> <td>INSURER B :</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A :SOUTHERN-OWNERS	10190	INSURER B :		INSURER C :		INSURER D :		INSURER E :		INSURER F :
INSURER(S) AFFORDING COVERAGE	NAIC #													
INSURER A :SOUTHERN-OWNERS	10190													
INSURER B :														
INSURER C :														
INSURER D :														
INSURER E :														
INSURER F :														
INSURED Hastings Homes Inc. 3613 Bancroft Avenue Orange Orlando FL 32833-														

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			114682 72741408	04/22/2015	04/22/2016	EACH OCCURRENCE \$ 500,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 500,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS			114682 72741408	04/22/2015	04/22/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$				/ /	/ /	EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A		/ /	/ /	<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	INMRC			114682 72741408	04/22/2015	04/22/2016	5,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER **CANCELLATION**


() - () -

City of Belle Isle
1600 Nela Ave

Belle Isle FL 32809-

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE





JEFF ATWATER
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

**** CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW ****

CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation law.

EFFECTIVE DATE: 5/5/2015 **EXPIRATION DATE:** 5/4/2017
PERSON: HASTINGS KEITH E

FEIN: 562403337

BUSINESS NAME AND ADDRESS:

HASTINGS HOMES INC

3613 BANCROFT BLVD
ORLANDO FL 32833

SCOPES OF BUSINESS OR TRADE:

LICENSED GENERAL LICENSED RESIDENTIAL
CONTRACTOR CONTRACTOR



HASTINGS, KEITH ERNEST
HASTINGS HOMES INC
3613 BANCROFT BLVD
ORLANDO FL 32833

The RESIDENTIAL CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2016

LICENSE NUMBER	CRC057105
----------------	-----------

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

LICENSE NUMBER	CBC1259735
----------------	------------

The BUILDING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2016

HASTINGS, KEITH ERNEST
HASTINGS HOMES, INC.
3613 BANCROFT BLVD
ORLANDO FL 32833



Scott Randolph, Tax Collector Local Business Tax Receipt Orange County, Florida

Local business tax receipt is in addition to and not in lieu of any other tax required by law or municipal ordinance. Businesses are subject to regulation of zoning, health and authorities. This receipt is valid from October 1 through September 30 of receipt year. Delinquent penalty is added October 1.

2015 EXPIRES 9/30/2016 1801-0962126
1801 CERTIFIED RES CONTRA \$30.00 1 EMPLOYEE

TOTAL TAX \$30.00
PREVIOUSLY PAID \$30.00
TOTAL DUE \$0.00



HASTINGS KEITH E QUALIFIER
HASTINGS HOMES INC
HASTINGS KEITH E QUALIFIER
3613 BANCROFT BLVD
ORLANDO FL 32833-4227

806 RIVER COVE AV (MOBILE)
U - ORLANDO, 32825

PAID: \$30.00 0099-00668629 7/7/2015